COMMERCE COMMISSION

CHIGHNAL

For Commission Use Only:

Case: 06-5678

7006 OCT 17+P 12: 34,46

CHIEF CLERK'S OFFICE

FORMAL COMPLAINT

Illinois Commerce Commission 527 E. Capitol Avenue Springfield, Illinois 62701

Regarding a complaint by (Person making the complaint):
Against (Utility name): Commonwealth Edison Company
As to (Reason for complaint) See attached dawnests I
am requestions damages as a result of
Ce power interruption July 31, 2006-August 2,
in Chicago Illinois. 2006
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:
My mailing address is 26 East 14th Place Wait 15, Chicaso, Ic
The service address that I am complaining about is \underline{Scime}
My home telephone is
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at [312] 756-4141
(Full name of utility company) Common Wealth Edison Company respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.
735 ILCS 5/10-109
735 ILCS 5/16-125
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?
Has your complaint filed with that office been closed?

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.
See my letter Dated August 15, 2006. I request \$6016.66 as reimbursement of Damages incurred due to power failure from July 31, 2006 to August 2, 2006.
request \$616.66 as reimbusement
Damages Incurred due to posser lande
fam July 31, 2006 to August 2, 2006.
Please clearly state what you want the Commission to do in this case:
Aunal damages in the Comount of \$606.66.
Date: October 11, 2006 Complainant's Signature (Month, day, year)
If an attorney will represent you, please give the attorney's name, address, and telephone number.
I am an attorney and will represent myself.
You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).
VERIFICATION
A notary public must witness the completion of this part of the form.
I,
(Signature)
Subscribed and sworn/affirmed to before me on (month, day, year) OCTOSET 11, 2006
Notary Public, Illinois COFFICIAL SEATURE
Notary Public, Illinois "OFFICIAL SEAL" Diana M. Lopez Notary Public, State of Illinois My Commission Exp. 02/16/2010
AIRTE Ed

NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.